CLAIMS ONLY SERIAL NO. 04973125 APPLICANT(S)											FILING DATE 10 - 08 - 01				
CLAIM															
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT				û		4		5		
	DAD.	DEP.	UKD.	DEP	INO.	DEP.			IND.	DEP.	DND.	QEP.	IND.	DEP.	
1			<u></u>	7			'	51				ļ	ļ		
3		/	 \ 	/			}	52 53					 		
4		,		/				54							
5		1		/				55							
6		1						56				<u> </u>			
7		/_		1			ł	57			-	 			
8 9	 	1	/	\rightarrow			1	58 59				 	 		
10	 	1	4	\Rightarrow				60							
11		7	1	/			1 .	61							
12		/		/_				62				ļ			
13		1	 	<u> </u>				63				 			
14	ļ	 /_	_/	1				64 65				 			
15 16	 -	 		7				86	 -		 	<u> </u>			
17			<i>F</i>	<u> </u>		l		67			<u> </u>	 			
18		1		1			1	68							
19		1		1]	69				ļ <u>.</u>			
20		1		1		ļ		70				ļ			
21		'.	 	+				71 72				 			
22 23		/	ļ			-	ł	73			 	1			
24		-/		+			f	74				 			
25	 	1					1	75			1				
26		1] ,	76							
27		1						77					L		
28		1						78			ļ	 	ļ		
29		<i>!</i>					!	79 80			ļ	 			
30 31		/					l	81			-	 			
322		 /-						82		*****		†			
33		1	-					83							
34		1						84							
35							ļ	85			ļ				
38		<u> </u>					ł	86 87				-			
37 38	-	 -					{	88				 		<u> </u>	
39							1	89				† -	 		
40]	90							
41								91				ļ <u>.</u>			
42			ļ					92			<u> </u>	<u> </u>			
43	<u> </u>	<u> </u>				ļ <u>.</u>	1	93 94							
44	 		 				1	95		ļ <u>.</u>			 		
46	 	<u> </u>	 				1	96			 	 	 		
47							1	97							
48]	98							
49								99		ļ			ļ		
50	<u> </u>		<u> </u>		_	<u> </u>	1	100 TOTAL	 		 	 -	 		
TOTAL IND.	,	ا ا	1] _#		ا ي	1	IND.		E		€_ ا		_8	
TOTAL DEP.	33		7	ت				TOTAL DEP.			<u> </u>			<u></u>	
TOTAL CLAIMS	34]	YOYAL CLAIMS		L	L		L		
				*MAY E	BE USED I	FOR ADD	MONAL C	CLAIMS OF	R ADMENI	DMENTS	U.S.DEJ	PARTMEN	T OF COM	IMERCE	
FORM P1	TO-2022 (1	-98)									Pateri e	no rreden	nauk Office		